



Request for Support for Indirect Education Re: Covid-19 Pandemic

STUDENT INFORMATION

Legal Last Name, First Name:		Grade:	
First Nation's Band Name:	Band #	On-reserve <input type="checkbox"/> Off-reserve <input type="checkbox"/>	
Type of school: Public School <input type="checkbox"/> Private School <input type="checkbox"/> High Cost Private School <input type="checkbox"/>		School Name:	
Have you contacted the school? Yes <input type="checkbox"/> No <input type="checkbox"/>	School Contact Name:	School Contact Phone:	

PARENT INFORMATION

Legal Parent/Guardian:	
Home Phone:	Cell Phone:
Email:	

REQUEST INFORMATION

Type of Request - Item requested, cost of item (if any), need for item, etc:
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Date of Request:

OFFICE USE ONLY

Recommendations:

Follow-Up:

Parent JDE:	Student JDE:	Nominal Roll: Yes <input type="checkbox"/> No <input type="checkbox"/>
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Total Cost:	Approved <input type="checkbox"/> Denied <input type="checkbox"/>	Date Approved:
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Completed By:	Authorized By:
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